

APPLICATION DATA SHEET

Electronic Version v14
Stylesheet Version v14.1

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MAY 02 2005

Applicant Information:

Inventor 1:

| | |
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| Applicant Authority Type: | Inventor |
| Citizenship: | US |
| Given Name: | Barry |
| Family Name: | Finkelstein |
| City of Residence: | Purchase |
| State of Residence: | NY |
| Country of Residence: | US |
| Address-1 of Mailing Address: | 9 Meadow Lane |
| Address-2 of Mailing Address: | |
| City of Mailing Address: | Purchase |
| State of Mailing Address: | NY |
| Postal Code of Mailing Address: | 10577-2512 |
| Country of Mailing Address: | US |
| Phone: | |
| Fax: | |
| E-mail: | |

Inventor 2:

| | |
|--|------------------------|
| Applicant Authority Type: | Inventor |
| Citizenship: | US |
| Given Name: | Brian |
| Family Name: | Barrett |
| City of Residence: | Irvington |
| State of Residence: | NY |
| Country of Residence: | US |
| Address-1 of Mailing Address: | 10 Hendrick Lane South |
| Address-2 of Mailing Address: | |
| City of Mailing Address: | Irvington |
| State of Mailing Address: | NY |
| Postal Code of Mailing Address: | 10533 |

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|--|---------------------|
| Country of Mailing Address: | US |
| Phone: | |
| Fax: | |
| E-mail: | |
| Inventor 3: | |
| Applicant Authority Type: | Inventor |
| Citizenship: | US |
| Given Name: | Steve |
| Family Name: | Padovano |
| City of Residence: | Fair Haven |
| State of Residence: | NJ |
| Country of Residence: | US |
| Address-1 of Mailing Address: | 60 Fairwaters Lane |
| Address-2 of Mailing Address: | |
| City of Mailing Address: | Fair Haven |
| State of Mailing Address: | NJ |
| Postal Code of Mailing Address: | 07704 |
| Country of Mailing Address: | US |
| Phone: | |
| Fax: | |
| E-mail: | |
| Inventor 4: | |
| Applicant Authority Type: | Inventor |
| Citizenship: | US |
| Given Name: | Linda |
| Family Name: | Lowry |
| City of Residence: | Brooklyn |
| State of Residence: | NY |
| Country of Residence: | US |
| Address-1 of Mailing Address: | 168 Congress Street |
| Address-2 of Mailing Address: | |
| City of Mailing Address: | Brooklyn |
| State of Mailing Address: | NY |
| Postal Code of Mailing Address: | 11201 |
| Country of Mailing Address: | US |
| Phone: | |

US-Request

Fax:**E-mail:****Inventor 5:****Applicant Authority Type:****Inventor****Citizenship:****US****Given Name:****Marlene****Family Name:****Debel****City of Residence:****Woodbury****State of Residence:****NY****Country of Residence:****US****Address-1 of Mailing Address:****15 The Rise****Address-2 of Mailing Address:****City of Mailing Address:****Woodbury****State of Mailing Address:****NY****Postal Code of Mailing Address:****11797****Country of Mailing Address:****US****Phone:****Fax:****E-mail:****Inventor 6:****Applicant Authority Type:****Inventor****Citizenship:****US****Given Name:****Eric****Family Name:****Steifman****City of Residence:****New York****State of Residence:****NY****Country of Residence:****US****Address-1 of Mailing Address:****310 W. End Avenue****Address-2 of Mailing Address:****#10B****City of Mailing Address:****New York****State of Mailing Address:****NY****Postal Code of Mailing Address:****10023****Country of Mailing Address:****US****Phone:****Fax:**

E-mail:

Inventor 7:**Applicant Authority Type:****Inventor****Citizenship:****US****Given Name:****Thomas****Family Name:****Visone****City of Residence:****Milbourn****State of Residence:****NJ****Country of Residence:****US****Address-1 of Mailing Address:****896 Ridgewood Road****Address-2 of Mailing Address:****City of Mailing Address:****Millburn****State of Mailing Address:****NJ****Postal Code of Mailing Address:****07041****Country of Mailing Address:****US****Phone:****Fax:****E-mail:**Inventor 8:**Applicant Authority Type:****Inventor****Citizenship:****US****Given Name:****John****Family Name:****Fromholtz****City of Residence:****Leonia****State of Residence:****NJ****Country of Residence:****US****Address-1 of Mailing Address:****161 Oakdene Avenue****Address-2 of Mailing Address:****City of Mailing Address:****Leonia****State of Mailing Address:****NJ****Postal Code of Mailing Address:****07605****Country of Mailing Address:****US****Phone:****Fax:****E-mail:**Inventor 9:

| | | |
|---------------------------------|------------------|--------------------|
| Applicant Authority Type: | Inventor | RECEIVED |
| Citizenship: | US | CENTRAL FAX CENTER |
| Given Name: | Russell | MAY 02 2005 |
| Middle Name: | L | |
| Family Name: | Stein | |
| City of Residence: | Englewood Cliffs | |
| State of Residence: | NJ | |
| Country of Residence: | US | |
| Address-1 of Mailing Address: | 10 Karen's Lane | |
| Address-2 of Mailing Address: | | |
| City of Mailing Address: | Englewood Cliffs | |
| State of Mailing Address: | NJ | |
| Postal Code of Mailing Address: | 07632-1905 | |
| Country of Mailing Address: | US | |
| Phone: | | |
| Fax: | | |
| E-mail: | | |

Correspondence Information:

Customer Number: 021121 *021121*

Application Information:

Title of Invention: Method and system for supplementing directors' and officers' insurance
Application Type: regular, utility
Attorney Docket Number: MLCO.P-006-A

Botanic Information:

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